

NEVADA DEPARTMENT OF CORRECTIONS	SERIES 600 HEALTH CARE SERVICES	SUPERSEDES: AR 639 (10/27/02)
ADMINISTRATIVE REGULATIONS MANUAL	ADMINISTRATIVE REGULATION 639 MEDICAL RECORDS	EFFECTIVE DATE: 04/24/03

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PURPOSE

To set forth guidelines within the Department for the handling, confidentiality, documentation, and standardization of medical records.

AUTHORITY

NRS 49.265
NRS 209.131
NRS 458.055
NRS 629.051
NRS 629.061

DEFINITIONS

MEDICAL OFFICER – The designated caseworker or correctional staff at conservation camps and restitution centers who is the point of contact between Medical Division staff and inmates.

MEDICAL RECORDS – All written medical, dental, mental health evaluations, radiology reports, photographs, laboratory reports, and other information generated to document the care, diagnosis, and treatment of disease.

RESPONSIBILITY

All Medical Division Staff have the responsibility to have knowledge of and comply with this regulation.

Medical Officers at conservation camps and restitution centers are responsible to comply with this regulation.

APPLICABILITY

Applies to the inmate medical, dental, and mental health records within the Department.

PROCEDURES

639.01 MEDICAL RECORDS

1.1 Medical records provide written documentation of all health care rendered to patients, serve as a means of communication to assure continuity of care, provide a basis for planning individual care and evaluating the quality of that care, and assist in protecting the medico-legal interests of the individual, Department, and providers of care.

1.2 It is the policy of the Department to maintain complete medical, dental, and mental health records for each inmate throughout the period of incarceration. **(3-4354)**

1.2.1 The medical record will be initiated during the reception process.

1.2.2 The record will be standardized and uniform through the entire Department. It will include documentation of all occasions of service provided to inmate, both on-site and off-site, including but not limited to:

- Completed receiving form;
- Health appraisal data forms;
- All findings, diagnoses, treatments, dispositions;
- Medications;
- Laboratory, x-ray, diagnostic studies;
- Consent and refusal forms;
- Release of information forms;
- Place, date, and time of health encounters;

- Health service reports, e.g., dental, mental health, and consultations;
- Treatment plan, including nursing care plan;
- Progress notes; and
- Discharge summary of hospitalization and other termination summaries
copies of off-site care notes (e.g., hospital discharge summary, office notes,
test results) will routinely be requested. **(3-4376)**

1.2 All original medical, dental, mental health, and substance abuse data will be maintained in the medical record.

1.2.1 Copies may be kept in the outpatient mental health services to facilitate mental health Care. **(4-4377)**

1.3 The medical officer at the various conservation camps and restitution centers will be responsible for obtaining complete medical information on any treatment received by inmates under their charge.

1.3.1 This information will be placed in the designated sections of the inmate's medical record without delay.

1.3.2 They will also note in the progress notes all dental and/or medical visits or refusals to accept care.

1.4 The program administrator for alcohol and drug abuse programs will be responsible for maintaining complete records of intake assessment, treatment, progress, and discharge planning.

1.4.1 This information will be maintained in file folders in secure files, separate and apart from both medical and institutional files, in order to comply with NRS 458.055 and guidelines developed as a result of that statute.

1.4.2 Files in resident treatment programs are the responsibility of the appointed Alcohol and Drug Abuse Administrator for Medical Services.

1.5 The medical records of private contractors operating within an institution will comply with this regulation.

1.6 Confidentiality of Medical Records

1.6.1 Medical records will be maintained in secure files and will only be handled by
authorized Medical Division staff as well as the following persons: **(3-4378)**

- Wardens;

- Associate Wardens;
- Attorney General's Staff; and
- Other staff as granted by the Medical Director.

1.6.1.1 Staff other is not authorized to review any inmate medical record except per court order.

1.6.1.2 Inmates are not allowed access to another inmate's medical record.

1.6.2 Medical information, such as progress notes, laboratory and radiology results, and other pertinent information, will be made available to staff and contract physicians in the prison system.

1.6.2.1 Medical information will be released to outside health care providers only with written authorization from the inmate, except for approved outside consultation requested by institutional physicians, the pertinent copies of the inmate's medical records will be sent to the consulting physician. **(3-4378)**

1.6.2.2 Where required by law, appropriate public health agencies will be notified of reportable diseases.

1.6.2.3 Inmates' attorneys may obtain a copy of the medical records with a written request and signed authorization by the inmate.

1.6.2.4 Original medical and mental health records are kept together in the medical file, therefore, there is no need for an inmate to request any records directly from mental health services.

1.6.2.5 Only if said requests are completed with the stated purpose of use and the proper consent signed by the inmate, will copies of the record be furnished.

1.6.2.6 Copies will be charged to the requesting party at the rate per copy set by NRS 629.061.

1.6.2.7 All payments for copies must be tendered prior to any party receiving copies of medical records.

1.6.2.8 Original medical records will not be sent to outside agencies unless ordered by the court.

1.6.2.9 In the event original records are ordered in cases of litigation, only authorized Department staff will hand deliver the medical record.

- 1.6.2.10 Original medical records will not leave the possession of Department staff at any time. If they need to be left behind, copies will be made and the originals will then be returned to the institution's Medical Records Department.

1.6.3 All other requests for medical records will be transferred to the Health Information Archives Coordinator.

- 1.6.3.1 The Health Information Archives Coordinator will copy and send medical records as appropriate, clearing those necessary with the Attorney General's office prior to granting the request.

1.7 Inmate Review

1.7.1 Inmates may request to review their medical record under the direct supervision of the Department's Medical Division physicians, mid-level practitioners, and/or nursing staff.

- 1.7.1.1 Prior to the review, all medical and mental health records will be screened for confidentiality and impact of the review on the inmate's mental well-being.
- 1.7.1.2 All confidential materials and those that may negatively impact the inmate's mental well being will be removed from the medical record prior to review by the inmate.
- 1.7.1.3 Except under unique and special circumstances, as determined by the Medical Director or attending physician, an inmate will be permitted to review their medical record not more than once per calendar year.
- 1.7.1.4 Each review will be logged in the inmate's medical file.
- 1.7.1.5 Any request denied by the Medical Director or attending physician will also be documented in the file stating the reason for denial.

1.8 Inmate Transfers

- 1.8.1 When an inmate is transferred between institutions/facilities, the complete medical, mental health, and dental records will be transferred with the inmate. **(3-4378)**
 - 1.8.1.1 No inmate will be transferred without a medical record. If the medical record cannot be found, a temporary record will be used until the original is found.

- 1.8.1.2 The medical record will be sealed in an envelope with the yellow NCR copy of the completed Transfer Report, (DOC – 2602), attached to the outside of the envelope.
- 1.8.1.3 The original Transfer Report will be placed in the medical record before the envelope is sealed.
- 1.8.1.4 The Transfer Report will be completed by Medical Division staff and will include pertinent medical data that may affect the transportation process, e.g., medications and dosage, serious or potentially problematic medical disorders.
- 1.8.1.5 A nurse will sign the clearance for transfers between institutions, but a physician, physician extender, or an advanced practitioner of nursing must review and sign a clearance for all transfers to rural camps.
- 1.8.1.6 All medical information accumulated while the inmate is in an institution/facility is to be filed appropriately in the medical record before it is placed in the envelope. **(3-4361)**

1.8.2 When the medical record is received at the receiving institution/facility, the nursing staff will review the medical record for the pertinent information, noting this was done in the Progress Notes.

- 1.8.2.1 Appointments and referrals will be made as indicated. It will then be given to the Health Information Coordinator to review and file.
- 1.8.2.2 When an inmate is transferred Out for Treatment (OFT) for an indefinite period of time, the institutional records office is responsible for contacting the Health Information Archives Coordinator to obtain pertinent medical records.
- 1.8.2.3 A copy of the medical record will be sent to the receiving institution, the original medical record will remain in Medical Records Archives.
- 1.8.2.4 At no time will the original medical record be sent to an out-of-state institution/facility. If copies of records are sent with the inmate, a Transfer Report, (DOC-2602), will be completed as outlined above in Section 1.8.1.

1.9 Inmate Releases

1.9.1 When an inmate is released from the Department of Corrections, their medical records will be forwarded to Medical Records Archives where they will be maintained according to applicable state, federal, and local laws, rules, and regulations. **(3-4379)**

1.10 Forms

1.10.1 All medical records forms will be reviewed and approved by the Medical Records/Forms Committee and then forwarded to the Medical Director/designee for approval. They will then be given a forms number per AR 104, Development and Standardization of Forms.

REFERENCES

ACA Standards 3-4354,3-4361, 3-4376, 3-4377, 3-4378, 3-4379

ATTACHMENTS

Transfer Report, DOC-2602

Jackie Crawford, Director

Date

Ted D'Amico, D.O., Medical Director

Date

CONFIDENTIAL

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Yes No

THIS PROCEDURE SUPERSEDES ALL PRIOR WRITTEN PROCEDURES ON THIS SPECIFIC SUBJECT.